## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1. Corporati	JMENT # F32832			02-17-1999 90043 (	)23 ***150.00	
	RITE INTERIORS, INC.	• •				
1	ce of Business	Maifing Address		,		Bidii didii 100:
1210 STIRLING	3 RD.	1210 STIRLING RD. #4				
DANIA FL 330	104	DANIA FL 33004		DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualifed		. ,
2 Principal I	Place of Business	S. Mailles Address		04/30/1981	•	· · ·
2. Principal i	Place of business	2a. Mailing Address		4. FEI Number 59-2098102		pplied For
Suite, Apt	t. #. etc.	Suite, Apt. #, etc.		28-5080 105		ot Applicable Additional
22		27		5. Certifcate of Status Desired		Additional lequired
City & Sta	ite ,	City & State	***	6. Election Campaign Financing	¢E OO	May Be
23		28		Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	8. This corporation owes the current	· <u>-</u>	
24	25 9. Name and Address of Current	29 3	30	Personal Property Tax.	☐ Yes	·□No
		Kedistelen Walist	81 Name	10. Name and Address of New Reg	Jistered Agent	
,	DA, MARTIN					
1	FAIRMOUNT LANE		82 Street Addi	ress (P.O. Box Number is Not Acceptable	9)	
FT.	LAUDERDALE FL 33326		83		The state of the s	起,謂
	,	,	84 City		land was	3 - 13 , 14
1			84 City		FL 85 Zip	Code `
			l i			
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the pu	rnose of changing its	s registered
11. Pursuant office or agent. I a	t to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligati	2 and 607.1508, Florida Statutes of Florida. Such change was autions of, Section 607.0505, Florid	s, the above-named corp horized by the corporation fa Statutes.	poration submits this statement for the purion's board of directors. I hereby accept the	rnose of changing its	s registered egistered
11. Pursuant office or agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligati	or Florida. Such change was auti ions of, Section 607.0505, Florid	horized by the corporation and statutes.	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re	s registered egistered
agent. I a	registered agent, or both, in the State cam familiar with, and accept the obligations.  Signature, typed or printed name of registered agent	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	norized by the corporation of th	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re	egistered
agent. I a	registered agent, or both, in the State of am familiar with, and accept the obligati	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	horized by the corporation and statutes.	on's board of directors. I hereby accept the	rpose of changing its he appointment as re  DATE  ERS AND DIRECTO	ORS IN 12
SIGNATURE	registered agent, or both, in the State cam familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	horized by the corporation of th	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re	egistered
SIGNATURE  12.	registered agent, or both, in the State cam familiar with, and accept the obligati  Signature, typed or printed name of registered agent  OFFICERS AND  PD  RUDA, MARTIN	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	horized by the corporation dis Statutes.  Legistered Agent signature require  13.  1.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its he appointment as re  DATE  ERS AND DIRECTO	ORS IN 12
SIGNATURE  12.  TITLE  NAME	registered agent, or both, in the State cam familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	horized by the corporation distributes.  13.  1.1 TITLE  1.2 NAME	on's board of directors. I hereby accept the	rpose of changing its he appointment as re  DATE  ERS AND DIRECTO	ORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State cam familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD	or Florida. Such change was autions of, Section 607.0505, Florid and title if applicable. (NOTE: R	tegistered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS	on's board of directors. I hereby accept the	rpose of changing its he appointment as re  DATE  ERS AND DIRECTO	ORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State cam familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D. DIRECTORS	tegistered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE  ERS AND DIRECTO	egistered  DRS IN 12  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	registered agent, or both, in the State cam familiar with, and accept the obligati   Signature, typed or printed name of registered agent  OFFICERS AND  PD RUDA, MARTIN  442 FAIRMOUNT LANE  FT. LAUDERDALE FL 33326  STD  RUDA, GIDEON  7700 NW 87 AVE	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable.  O DIRECTORS  DELETE	tegistered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE  ERS AND DIRECTO	egistered  DRS IN 12  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State cam familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D DIRECTORS  DELETE  DELETE	tegistered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP	on's board of directors. I hereby accept the	pose of changing its eappointment as re	ORS IN 12 Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	registered agent, or both, in the State cam familiar with, and accept the obligati   Signature, typed or printed name of registered agent  OFFICERS AND  PD RUDA, MARTIN  442 FAIRMOUNT LANE  FT. LAUDERDALE FL 33326  STD  RUDA, GIDEON  7700 NW 87 AVE	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D. DIRECTORS	tegistered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE  ERS AND DIRECTO	egistered  DRS IN 12  Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State carm familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON 7700 NW 87 AVE TAMARAC FL 33321	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D DIRECTORS  DELETE  DELETE	tegistered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	on's board of directors. I hereby accept the	pose of changing its eappointment as re	ORS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State carm familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON 7700 NW 87 AVE TAMARAC FL 33321	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D DIRECTORS  DELETE  DELETE	tegistered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	on's board of directors. I hereby accept the	pose of changing its eappointment as re	ORS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State carm familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON 7700 NW 87 AVE TAMARAC FL 33321	DELETE  DELETE	tegistered Agent signature require  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2. 4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State carm familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND PD RUDA, MARTIN 442 FAIRMOUNT LANE FT. LAUDERDALE FL 33326 STD RUDA, GIDEON 7700 NW 87 AVE TAMARAC FL 33321	or Florida. Such change was autitions of, Section 607.0505, Florid and title if applicable. (NOTE: R. D DIRECTORS  DELETE  DELETE	tegistered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re	ORS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE  DELETE	Incrized by the corporation of t	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE  DELETE	tegistered Agent signature require  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE  DELETE	Incrized by the corporation of t	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE   DELETE   DELETE	Incirced by the corporation of t	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE   DELETE   DELETE	Incrized by the corporation of t	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE  DELETE  DELETE  DELETE	Incirced by the corporation of a Statutes.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE   DELETE   DELETE	Incirced by the corporation of a Statutes.  13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE ERS AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State carm familiar with, and accept the obligation of familiar with a support of familiar with, and accept the obligation of familiar with a support of familiar with	DELETE  DELETE  DELETE  DELETE	Incirced by the corporation of a Statutes.  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	on's board of directors. I hereby accept the	rpose of changing its ne appointment as re  DATE  ERS AND DIRECTO  Change  Change	DRS IN 12 Addition Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: M

CITY-ST-ZIP

**FILED** 

Feb 17, 1999 8:00am

**Secretary of State**